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CLERK US DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA
BY [signature] DEPUTY

PLAINTIFF/PETITIONER/MOVANT'S NAME Edwin L. Jones
3802 Rosecrans St 25
San Diego Ca. 92110
PRISON NUMBER
Ph. 619 7234257
PLACE OF CONFINEMENT

ADDRESS

United States District Court
Southern District Of California

'08 CV 1612 JAH WMc

Civil No. ______________________
(TO BE FILLED IN BY U.S. DISTRICT COURT CLERK)

Edwin L. Jones,
Plaintiff/Petitioner/Movant

v.

Superior Court,
Defendant/Respondent

MOTION AND DECLARATION UNDER PENALTY OF PERJURY IN SUPPORT OF MOTION TO PROCEED IN FORMA PAUPERIS

I,
declare that I am the Plaintiff/Petitioner/Movant in this case. In support of my request to proceed without prepayment of fees or security under 28 U.S.C. § 1915, I further declare I am unable to pay the fees of this proceeding or give security because of my poverty, and that I believe I am entitled to redress.

In further support of this application, I answer the following question under penalty of perjury:

1. Are you currently incarcerated? Yes **No** (circled) (If "No" go to question 2)

   If "Yes," state the place of your incarceration

   Are you employed at the institution? Yes **No** (circled)

   Do you receive any payment from the institution? Yes **No** (circled)

   [Have the institution fill out the Certificate portion of this affidavit and attach a certified copy of the trust account statement from the institution of your incarceration showing at least the last six months transactions.]

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2. Are you currently employed? Yes (No)

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer.

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b. If the answer is "No" state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

____

3. In the past twelve months have you received any money from any of the following sources?:

a. Business, profession or other self-employment Yes (No)
b. Rent payments, royalties interest or dividends Yes (No)
c. Pensions, annuities or life insurance (Yes) No
d. Disability or workers compensation Yes (No)
e. Social Security, disability or other welfare Yes (No)
e. Gifts or inheritances Yes (No)
f. Spousal or child support Yes (No)
g. Any other sources Yes (No)

If the answer to any of the above is "Yes" describe each source and state the amount received and what you expect you will continue to receive each month.

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4. Do you have any checking account(s)? Yes (No)

a. Name(s) and address(es) of bank(s): ______________________________

b. Present balance in account(s): ______________________________

5. Do you have any savings/IRA/money market/CDS' separate from checking accounts? Yes (No)

a. Name(s) and address(es) of bank(s):

b. Present balance in account(s):

6. Do you own an automobile or other motor vehicle? (Yes) No

a. Make: Sabu Year: 91 Model:

b. Is it financed? Yes (No)

c. If so, what is the amount owed? 0

7. Do you own any real estate, stocks, bonds, securities, other financial instruments, or other valuable property?
Yes ~~No~~ (No circled)
If "Yes" describe the property and state its value.______________________________

8. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. 0

9. List any other debts (current obligations, indicating amounts owed and to whom they are payable):
0

10. List any other assets or items of value (specify real estate, gifts, trusts inheritances, government bonds, stocks, savings certificates, notes, jewelry, artwork, or any other assets [include any items of value held in someone else's name]): 0

11. If you answered all of the items in #3 "No," and have not indicated any other assets or sources of income anywhere on this form, you must explain the sources of funds for your day-to-day expenses.
disabled pention — 6 monthes active duty at time of war.

I declare under penalty of perjury that the above information is true and correct and understand that a false statement herein may result in the dismissal of my claims.

09-03-08 [signature]
DATE SIGNATURE OF APPLICANT